

# Order on Court Fee Waiver After Reconsideration Hearing (Superior Court)

Clerk stamps date here when form is filed.

**1 Name of person who asked the court to waive court fees:**

Street or mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**2 Name of lawyer**, if person in **1** has one (*name, address, phone number, e-mail, and State Bar number*): \_\_\_\_\_

**3** The court made a previous fee waiver order in this case on (*date*): \_\_\_\_\_

**4** The court sent you a notice to go to court about your fee waiver on (*date*): \_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of**

Fill in case number and case name:

**Case Number:**

**Case Name:**

**Read this form carefully. All checked ☒ boxes are court orders.**

**5** There was a hearing on (*date*): \_\_\_\_\_  
at (*time*): \_\_\_\_\_ in (*Department*): \_\_\_\_\_

The following people were at the hearing (*check all that apply*):

☐ Person in **1** ☐ Lawyer in **2**

☐ Others (*names*): \_\_\_\_\_

**6** After considering the information provided at the hearing, **the court makes the following order:**

a. ☐ **No Change to Fee Waiver.** The *Order on Court Fee Waiver* issued by this court on (*date*): \_\_\_\_\_ remains in effect. No change is made at this time.

b. ☐ **Fee Waiver Is Ended as of (*date*):** \_\_\_\_\_. The court finds that beginning on that date you were no longer eligible for a fee waiver because): \_\_\_\_\_

(1) You must pay all court fees in this case from the date of this order.

(2) ☐ You must also pay the court \$ \_\_\_\_\_ for fees that were initially waived after you were no longer eligible.

(a) ☐ You must pay that amount within 10 days of this order.

(b) ☐ You may pay that amount in monthly payments of \$ \_\_\_\_\_ beginning (*date*): \_\_\_\_\_ and payable on the 1st of each month after that until paid in full.

c. ☐ **Fee Waiver Is Retroactively Withdrawn.** The court finds that you were never entitled to a fee waiver in this case because: \_\_\_\_\_

(1) You must pay all court fees in this case from the date of this order.

(2) ☐ You must also pay the court \$ \_\_\_\_\_ for fees that the court initially waived.

(a) ☐ You must pay that amount within 10 days of this order.

(b) ☐ You may pay that amount in monthly payments of \$ \_\_\_\_\_ beginning (*date*): \_\_\_\_\_ and payable on the 1st of each month after that until paid in full.

Case Number: \_\_\_\_\_

Your name: \_\_\_\_\_

⑥ d. ☐ **Fee Waiver Is Modified.** The court finds that you obtained the initial fee waiver in bad faith, for an improper purpose, or to needlessly increase the costs of litigation. The court places the following limitations on the fee waiver that was granted to you:

(1) ☐ You must pay all court fees in this case from the date of this order.

(2) ☐ From the date of this order, only the following court fees will be waived (*court to check all that apply*).

**You must pay for all court fees that are not checked below:**

- |                                                                                                 |                                                                                               |                                                         |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Filing papers at superior court                                        | <input type="checkbox"/> Making certified copies                                              | <input type="checkbox"/> Giving notice and certificates |
| <input type="checkbox"/> Sheriff's fee to give notice                                           | <input type="checkbox"/> Sending papers to another court department                           |                                                         |
| <input type="checkbox"/> Court-appointed interpreter                                            | <input type="checkbox"/> Court-appointed interpreter fees for a witness                       |                                                         |
| <input type="checkbox"/> Reporter's daily fee ( <i>up to 60 days after date of fee waiver</i> ) | <input type="checkbox"/> Reporter's daily fees ( <i>beyond 60 days after the fee waiver</i> ) |                                                         |
| <input type="checkbox"/> Jury fees and expenses                                                 | <input type="checkbox"/> Fees for a peace officer to testify in court                         |                                                         |
| <input type="checkbox"/> Court-appointed expert's fees                                          | <input type="checkbox"/> Court fees for telephone hearings                                    |                                                         |
| <input type="checkbox"/> Other ( <i>specify</i> ): _____                                        |                                                                                               |                                                         |

(3) ☐ Other modification: \_\_\_\_\_

e. ☐ **Other Order:** \_\_\_\_\_

Date: \_\_\_\_\_



\_\_\_\_\_  
*Signature of Judge or Judicial Officer*

### Clerk's Certificate of Service

I certify that I am not involved in this case and (*check one*): ☐ A certificate of mailing is attached.

☐ I handed a copy of this order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.

☐ This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (*city*): \_\_\_\_\_, California on the date below.

Date: \_\_\_\_\_

Clerk, by \_\_\_\_\_, Deputy